

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 668091

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: BARRY'S ENTERPRISES, INC.

**Current Principal Place of Business:**

1801 N. WASHINGTON BLVD.  
C/O JAMES R BOYER  
SARASOTA, FL 34234

**New Principal Place of Business:**

**Current Mailing Address:**

1801 N. WASHINGTON BLVD.  
C/O JAMES R BOYER  
SARASOTA, FL 34234

**New Mailing Address:**

FEI Number: 59-2005625      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOYER, JAMES R.  
1800 2ND ST. SUITE 765  
SARASOTA, FL 34236      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: FASOLD, BARRY R. JR.,  
Address: 1100 IMPERIAL DRIVE #408  
City-St-Zip: SARASOTA, FL 34236

Title: V      ( ) Delete  
Name: FASOLD-SAPP, BETH ANN  
Address: 7869 N LEEWYNN DR  
City-St-Zip: SARASOTA, FL 34240

Title: ST      ( ) Delete  
Name: FASOLD, BRAD F.,  
Address: 315 BYRN MAWR ISLAND  
City-St-Zip: BRADENTON, FL 34207

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY FASOLD, JR.

PRES

01/15/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date